

Please type a plus sign (+) inside this box



UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	4162P001C
	First Inventor	John Xiaoziong Zhong, et al.
	Title	Design Verification By Symbolic Simulation Using a Native Hardware
	Express Mail Label No.	EV336582460US


17302 U.S. PTO
10/620628
07/15/03

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents</i>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i></p> <p>2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p>3. <input checked="" type="checkbox"/> Specification <i>[Total Pages 24]</i> <i>(preferred arrangement set forth below)</i> - Descriptive title of the invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the invention - Brief Summary of the invention - Brief Description of the Drawings <i>(if filed)</i> - Detailed Description - Claim(s) - Abstract of the Disclosure</p> <p>4. <input checked="" type="checkbox"/> Drawing(s) <i>(35 U.S.C. 113)</i> <i>[Total Sheets 2]</i></p> <p>5. Oath or Declaration (signed) <i>[Total Pages 6]</i> a. <input type="checkbox"/> Newly executed (original or copy) b. <input checked="" type="checkbox"/> Copy from a prior application (37 C.F.R. § 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i> i. <input type="checkbox"/> DELETION OF INVENTOR(S) <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></p> <p>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</p> <p>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i></p> <p>8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all of the following are necessary)</i> a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies</p> <p>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>10. <input type="checkbox"/> 37 C.F.R. § 3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i></p> <p>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i></p> <p>12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>13. <input checked="" type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Application Amended to Reflect Claim of Priority</p> <p>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i></p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i></p> <p>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.</p> <p>17. <input type="checkbox"/> Other: _____</p>	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No: 09/395,873
Prior application Information: Examiner Stacy Whitmore Group/Art Unit: 2812

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS					
<input checked="" type="checkbox"/> Customer Number or Bar Code Label		 *08791*		or <input type="checkbox"/> Correspondence address below	
Name _____					
Address _____					
City _____		State _____		Zip Code _____	
Country _____		Telephone (408) 720-8300		Fax (408) 720-8383	

Name (Print/Type)	Michael J. Mallie	Registration No. (Attorney/Agent)	36,591
Signature		Date	7/15/03

Serial/Patent No.: *** Filing/Issue Date: ***
Client: Innologic Systems, Inc.
Title: DESIGN VERIFICATION BY SYMBOLIC SIMULATION USING A
NATIVE HARDWARE DESCRIPTION LANGUAGE
BSTZ File No.: 04162.P001C Atty/Secty Initials: MJM/amq
Date Mailed: 7-15-03 Docket Due Date: ***

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|--|--|--|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input checked="" type="checkbox"/> Express Mail No.: _____ | <input checked="" type="checkbox"/> Check No. <u>58710</u> |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input type="checkbox"/> _____ Month(s) Extension of Time | Amt: <u>750.00</u> |
| <input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO-1449 (____ pgs.) | <input type="checkbox"/> Check No. _____ |
| <input checked="" type="checkbox"/> Application - Rule 1.53(b) Continuation (<u>1</u> pgs.) | <input type="checkbox"/> Issue Fee Transmittal | Amt: _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | <input type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) | <input type="checkbox"/> Petition for _____ | |
| <input type="checkbox"/> Application - Design (____ pgs.) | <input checked="" type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (____ pgs.) | <input type="checkbox"/> Power of Attorney (____ pgs.) | |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | <input checked="" type="checkbox"/> Preliminary Amendment (<u>7</u> pgs.) | |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (____ pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input type="checkbox"/> Declaration & POA (____ pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.) | <input type="checkbox"/> Transmittal Letter, in duplicate | |
| <input type="checkbox"/> Drawings: _____ # of sheets includes _____ figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate | |

☒ Other: Copy of Prior Application (24 pgs.) and Declaration
(6 pgs.) and Drawings (2 pgs.).

"Express Mail" mailing label number EU336582460US

Date of Deposit July 15, 2003

I hereby state that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450

Angel M. Quinn
(Typed or printed name of person mailing paper or fee)

[Signature]
(Signature of person mailing paper or fee)

7-15-03
(Date signed)

FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) 750.00

Complete if Known

Application Number	Not Yet Assigned
Filing Date	
First Named Inventor	John Xiaozhong Zhong
Examiner Name	Stacy Whitmore
Group/Art Unit	2812
Attorney Docket No.	4162P001C

METHOD OF PAYMENT (check one)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account

Deposit Account Number 02-2666

Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

The Commissioner is authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below ☒ Credit any overpayments
☒ Charge any additional fee(s) required under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.
☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	750.00
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$) 750.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
18	20*	0	\$0.00
Independent Claims	2	3*	0
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	18	2202	9	Claims in excess of 20
1201	84	2201	42	Independent claims in excess of 3
1203	280	2203	140	Multiple Dependent claim, if not paid
1204	84	2204	42	**Reissue independent claims over original patent
1205	18	2205	9	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater, For Reissues, see below

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
2053	130	2053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1404	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	2451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	2460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	1809	375	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	
1802	900	1802	900	Request for expedited examination of a design application	

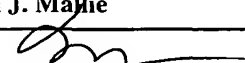
Other fee (specify) _____

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) _____

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Michael J. Mallie	Registration No. (Attorney/Agent)	36,591	Telephone	(408) 720-8300
Signature		Date	7/15/03		

Serial/Patent No.: *** Filing/Issue Date: ***
Client: Innologic Systems, Inc.
Title: DESIGN VERIFICATION BY SYMBOLIC SIMULATION USING A
NATIVE HARDWARE DESCRIPTION LANGUAGE
BSTZ File No.: 04162.P001C Atty/Secty Initials: MJM/amg
Date Mailed: 7-15-03 Docket Due Date: ***

The following has been received in the U.S. Patent & Trademark Office on the date stamped hereon:

- | | | |
|--|--|---|
| <input type="checkbox"/> Amendment/Response (____ pgs.) | <input checked="" type="checkbox"/> Express Mail No.: _____ | <input checked="" type="checkbox"/> Check No. 58710 |
| <input type="checkbox"/> Appeal Brief (____ pgs.) (in triplicate) | <input type="checkbox"/> _____ Month(s) Extension of Time | Amt: 750.00 |
| <input type="checkbox"/> Application - Utility (____ pgs., with cover and abstract) | <input type="checkbox"/> Information Disclosure Statement & PTO-1449 (____ pgs.) | <input type="checkbox"/> Check No. _____ |
| <input checked="" type="checkbox"/> Application - Rule 1.53(b) Continuation (1 pgs.) | <input type="checkbox"/> Issue Fee Transmittal | Amt: _____ |
| <input type="checkbox"/> Application - Rule 1.53(b) Divisional (____ pgs.) | <input type="checkbox"/> Notice of Appeal | |
| <input type="checkbox"/> Application - Rule 1.53(b) CIP (____ pgs.) | <input type="checkbox"/> Petition for Extension of Time | |
| <input type="checkbox"/> Application - Rule 1.53(d) CPA Transmittal (____ pgs.) | <input type="checkbox"/> Petition for _____ | |
| <input type="checkbox"/> Application - Design (____ pgs.) | <input checked="" type="checkbox"/> Postcard | |
| <input type="checkbox"/> Application - PCT (____ pgs.) | <input type="checkbox"/> Power of Attorney (____ pgs.) | |
| <input type="checkbox"/> Application - Provisional (____ pgs.) | <input checked="" type="checkbox"/> Preliminary Amendment (7 pgs.) | |
| <input type="checkbox"/> Assignment and Cover Sheet | <input type="checkbox"/> Reply Brief (____ pgs.) | |
| <input checked="" type="checkbox"/> Certificate of Mailing | <input type="checkbox"/> Response to Notice of Missing Parts | |
| <input type="checkbox"/> Declaration & POA (____ pgs.) | <input type="checkbox"/> Small Entity Declaration for Indep. Inventor/Small Business | |
| <input type="checkbox"/> Disclosure Docs & Orig & Copy of Inventor's Signed Letter (____ pgs.) | <input type="checkbox"/> Transmittal Letter, in duplicate | |
| <input type="checkbox"/> Drawings: _____ # of sheets includes _____ figures | <input checked="" type="checkbox"/> Fee Transmittal, in duplicate | |

☒ Other: Copy of Prior Application (24 pgs.) and Declaration (6 pgs.) and Drawings (2 pgs.).

"Express Mail" mailing label number

Date of Deposit

I hereby state that I am causing this paper or fee to be deposited with the United States Postal Service "Express Mail Post Office to Addressee" service on the date indicated above and that this paper or fee has been addressed to the Commissioner for Patents, PO Box 450 Alexandria Virginia 22313-1450

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

(Date signed)